

File with:
Iowa Ethics and Campaign
Disclosure Board
510 E. 12th, Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-4073



FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

RECEIVED
E-MAIL
AUG 29 2008

COMMITTEE NAME (Must be same as on Statement of Organization)

Grupp For School Board

IMPORTANT: Indicate by # type of committee you are reporting for: 7

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC
(11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

Greg Grupp

Political Party (if applicable)

Office Sought

Board of Education Sioux City Community School DISTRICT

District (if Senate or House)

FORM DR-2 (Rev. 07/2007)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	_____
Logged In	_____
Scanned	_____
Computer	_____
Audited	_____

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

Barbara Benson
SIGNATURE OF PERSON FILING REPORT

712 253 3201
TELEPHONE

8-29-08
DATE SIGNED

I AM FILING A 5 days prior to election REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.
(report date) Indicate by # 1

☐ CHECK IF AMENDMENT TO REPORT DATED _____

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in
which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 0.00

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

5,975.00

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL \$ 5,975.00

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

3,086.23

Schedule F: Loan Repayments total (Attach Schedule F)

CASH ON HAND at the end of this reporting period (if final report balance must be zero)

\$ 2,888.77

****UNPAID BILLS** (From Schedule D - Attach Schedule D)

\$ 1,431.25

****IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E)

\$ 37.35

****OUTSTANDING LOANS** (From Schedule F - Attach Schedule F)

CONSULTANT BREAKDOWN (Schedule G Attached?)

___ YES ___ NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Grupp For School Board

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
08/06/08	ID# CK#	Dr. Randall P Bergen 3319 Pierce St Sioux City, IA 51104		\$25.00	<input type="checkbox"/>
08/07/08	ID# CK#	Regina Roth 984 Quail Hollow Cir Dakota Dunes, SD 57049		200.00	<input type="checkbox"/>
08/07/08	ID# CK#	James R Wharton 4529 Grayhawk Ridge Dr Sioux City, IA 51106		50.00	<input type="checkbox"/>
08/07/08	ID# CK#	C. E. Wolfe 400 Pelletier Dr Sioux City, IA 51104		100.00	<input type="checkbox"/>
08/07/08	ID# CK#	Gail Bernstein 940 Spyglass Cir Dakota Dunes, SD 57049		250.00	<input type="checkbox"/>
08/08/08	ID# CK#	Avery Brothers LLC "A Partnership" 2420 Correctionville Rd Sioux City, IA 51106		200.00	<input type="checkbox"/>
08/08/08	ID# CK#	Irving F Jensen Jr. Trust 4320 Perry Way Sioux City, IA 51104		200.00	<input type="checkbox"/>
08/08/08	ID# CK#	Gerald J McGowan 2605 W Solway St Sioux City, IA 51104		100.00	<input type="checkbox"/>
08/08/08	ID# CK#	Steve W Corrie 203 Vista Ct Sioux City, IA 51104		100.00	<input type="checkbox"/>
08/08/08	ID# CK#	Colonel F Krage 4630 Perry Way Sioux City, IA 51104		50.00	<input type="checkbox"/>
SUB-TOTAL				\$ 1275.00	
TOTAL (If last page of this schedule)				\$	

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Page 1 of 6
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)



SCHEDULE A (Rev. 07/03)		MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM		

COMMITTEE NAME (Must be same as on Statement of Organization)

Grupp for School Board

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
07/22/08	ID# CK#	Barbara Benson 3701 Briar Path Sioux City, IA 51104		\$50.00	<input type="checkbox"/>
07/23/08	ID# CK#	Debi Durham 3834 Country Club Blvd Sioux City, IA 51104		100.00	<input type="checkbox"/>
08/05/08	ID# CK#	Elizabeth Pavone 4130 Country Club Blvd Sioux City, Ia 51104		100.00	<input type="checkbox"/>
08/05/08	ID# CK#	Lynn A Mills 4571 Hamilton Blvd Sioux City, IA 51104		100.00	<input type="checkbox"/>
08/05/08	ID# CK#	Carol K Sitzmann 3463 Lindenwood St Sioux City, IA 51104		25.00	<input type="checkbox"/>
08/05/08	ID# CK#	Diane Gray 3801 Orchard St Sioux City, IA 51104		150.00	<input type="checkbox"/>
08/05/08	ID# CK#	Larry Williams 1754 Aztec Circle Sioux City, IA 51104		50.00	<input type="checkbox"/>
08/05/08	ID# CK#	Greg Grupp 4406 Cheyenne Blvd Sioux City, IA 51104	self	150.00	<input type="checkbox"/>
08/06/08	ID# CK#	Thomas R Lohry 1850 Plum Creek Rd Sioux City, IA 51103		100.00	<input type="checkbox"/>
08/06/08	ID# CK#	Keith Shellhammer 4540 Perry Way Sioux City, IA 51104		100.00	<input type="checkbox"/>
SUB-TOTAL				\$ 925.00	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)



SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Grupp For School Board

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08/08/08	ID# CK#	Jamie D Bowers 4301 Vine Ave Sioux City, IA 51106		\$100.00	<input type="checkbox"/>
08/11/08	ID# CK#	Ritch LeGrand 29 W Kings Hwy Sioux City, IA 51104		100.00	<input type="checkbox"/>
08/11/08	ID# CK#	Ronald A Jorgensen 5921 Pine View Dr. Sioux City, IA 51106		50.00	<input type="checkbox"/>
08/12/08	ID# CK#	Peter W Thoreen 110 W 40th St Sioux City, IA 51104		100.00	<input type="checkbox"/>
08/12/08	ID# CK#	Rita C Grimm 4214 Country Club Blvd Sioux City, IA 51104		100.00	<input type="checkbox"/>
08/11/08	ID# CK#	Thomas F Vaughan 3830 Jones St Sioux City, IA 51104		100.00	<input type="checkbox"/>
08/11/08	ID# CK#	Lynn Posey 2800 Summit St Sioux City, IA 51104		125.00	<input type="checkbox"/>
08/12/08	ID# CK#	David Bernstein P O Box 5104 Sioux City, IA 51102		100.00	<input type="checkbox"/>
08/13/08	ID# CK#	Dan Youngblade 10 Red Fox Run Sioux City, IA 51104		250.00	<input type="checkbox"/>
08/13/08	ID# CK#	Brad Bergstrom 3705 Martins Yard Sioux City, IA 51104		100.00	<input type="checkbox"/>
SUB-TOTAL				\$ 1125.00	
TOTAL (if last page of this schedule)				\$	

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Page 3 of 6
(for Schedule A)

For Instructions, See Back of Form



CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Grupp For School Board

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08/13/08	ID# CK#	Enola G. Peters 2021 Strawberry Ln Sioux City, IA 51104		\$25.00	<input type="checkbox"/>
08/13/08	ID# CK#	Mrs. James Yanney 3915 Sylvian Way Sioux City, IA 51104		100.00	<input type="checkbox"/>
08/13/08	ID# CK#	Renee Beaulieu 33501 Hickory Ave. Sioux City, IA 51108		30.00	<input type="checkbox"/>
08/15/08	ID# CK#	Daniel T Myers 3306 Stone Park Blvd Sioux City, IA 51104		100.00	<input type="checkbox"/>
08/14/08	ID# CK#	Michael L. Bennett 4508 Stoneridge Pt Sioux City, IA 51106		100.00	<input type="checkbox"/>
08/15/08	ID# CK#	Bruce Lewis 3119 Knollwood Court Sioux City, IA 51106		50.00	<input type="checkbox"/>
08/13/08	ID# CK#	Gretchen Gondek 4424 46th St Court Sioux City, IA 51108		25.00	<input type="checkbox"/>
08/13/08	ID# CK#	K.G. Skip Perley 524 Pelletier Dr Sioux City, IA 51104		250.00	<input type="checkbox"/>
08/18/08	ID# CK#	Roland D Junck 2612 Castles Gate Dr Sioux City, IA 51106		50.00	<input type="checkbox"/>
08/18/08	ID# CK#	Susan L Koehrsen 510 W Second St Muscatine, IA 52761		50.00	<input type="checkbox"/>
SUB-TOTAL				\$ 780.00	
TOTAL (if last page of this schedule)				\$	

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Page 4 of 6
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)



SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Grupp For School Board

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08/19/08	ID# CK#	Ed Den Beste 3806 Nebraska Street Sioux City, IA 51104		\$50.00	<input type="checkbox"/>
08/19/08	ID# CK#	Ellen Dachauer Kaplan 701 Buckwalter Dr Sioux City, IA 51104		150.00	<input type="checkbox"/>
08/19/08	ID# CK#	Larry Countryman 384 Bluestem Trail Dakota Dunes, SD 57049		25.00	<input type="checkbox"/>
08/19/08	ID# CK#	Joseph M Puetz 2027 Ravens Ct Sioux City, IA 51104		50.00	<input type="checkbox"/>
08/19/08	ID# CK#	W.E. Rusty Clark 3847 Pierce St Sioux City, IA 51104		50.00	<input type="checkbox"/>
08/22/08	ID# CK#	Frank Gray 2425 Mohawk Dr Sioux City, IA 51104		50.00	<input type="checkbox"/>
08/20/08	ID# CK#	Jeffrey R Mohrhauser 421 Queens Ct Sioux City, IA 51104		25.00	<input type="checkbox"/>
08/20/08	ID# CK#	John R Wagner 4417 Lost Meadows Rd Sioux City, IA 51108		250.00	<input type="checkbox"/>
08/22/08	ID# CK#	Paul A Fee M.D. 2901 Nebraska St Sioux City, IA 51104		200.00	<input type="checkbox"/>
08/21/08	ID# CK#	Todd Moss 5530 Lorraine Ave Sioux City, IA 51106		100.00	<input type="checkbox"/>
SUB-TOTAL				\$ 950.00	
TOTAL (if last page of this schedule)				\$	

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Page 5 of 6
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)



SCHEDULE A (Rev. 07/03)		MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM		

COMMITTEE NAME (Must be same as on Statement of Organization)

Grupp For School Board

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
08/25/08	ID# CK#	Sheila Liewer 33240 Glen Dr. #4 Sioux City, IA 51108		\$100.00	<input type="checkbox"/>
08/25/08	ID# CK#	Cynthia Moser 2519 W Solway St Sioux City, IA 51104		50.00	<input type="checkbox"/>
08/25/08	ID# CK#	Lin Sly 12 37th Street Pl Sioux City, IA 51104		100.00	<input type="checkbox"/>
08/25/08	ID# CK#	Joseph P Krage 4313 Lincoln Way Sioux City, IA 51106		50.00	<input type="checkbox"/>
08/28/08	ID# CK#	Timothy J Brown 4949 Country Club Blvd Sioux City, IA 51104		200.00	<input type="checkbox"/>
08/28/08	ID# CK#	Joe Uran 3812 Jones Sioux City, IA 51104		20.00	<input type="checkbox"/>
08/26/08	ID# CK#	Garrett K Smith 4301 Perry Way Sioux City, IA 51104		100.00	<input type="checkbox"/>
08/27/08	ID# CK#	John W. Gleeson 58 Red Bridge Dr Sioux City, IA 51104		200.00	<input type="checkbox"/>
08/27/08	ID# CK#	Don A. Seymour 662 Surrey Ln Sioux City, IA 51106		100.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 920.00	
TOTAL (if last page of this schedule)				\$ 5,975.00	

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Page 6 of 6
(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM



EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Grupp For School Board

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
08/07/08	ID# CK# 1	Record Printing 1117 Villa Avenue Sioux City, IA 51103	Yard signs	\$ 633.30
08/19/08	ID# CK# 2	Mail House Inc. P O Box 1105 Sioux City, IA 51102	Postage & services	984.42
08/26/08	ID# CK# 3	M&M Copy Quick Printing 422 Pierce St Sioux City, IA 51101	Postcards & printing	280.77
08/27/08	ID# CK# 4	Record Printing 1117 Villa Avenue Sioux City, IA 51103	Postcards & printing	363.94
08/28/08	ID# CK# 5	KSCJ Radio 2000 Indian Hills Dr Sioux City, IA 51104	Radio advertising	822.80
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 3086.23
TOTAL (if last page of this schedule)				\$ 3086.23

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Page 1 of 1

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Grupp For School Board

NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.

Reset Form

SCHEDULE
D
(Rev. 08/98) INCURRED
INDEBTEDNESS

☐ CHECK THIS BOX
IF AMENDING
FORM

**DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD
(DO NOT INCLUDE LOANS -- SHOW LOANS ON SCHEDULE F)**

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period, regardless of whether an invoice has been received.

DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
08/09/08	Guarantee Roofing 2005 4th Street Sioux City, IA 51101	Rental of wires for yard signs	\$ 100.00
08/29/08	Sioux City Journal 515 Pavonia St Sioux City, IA 51101	Newspaper advertising	1,331.25
SUB-TOTAL			\$ 1,431.25
TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD			\$ 1,431.25

*If actual figure is unknown, show "estimated" beside the figure.

Page 1 of 1
(for Schedule D)

CANDIDATE COMMITTEES NOTE:

*Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)
Grupp For School Board

Reset Form

SCHEDULE E (Rev. 06/97)	IN-KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

DATE RECEIVED (MM/DD/YY)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
07/21/08	Barbara Benson 3701 S Briar Path Sioux City, IA 51104		Post office box rental	\$ 29.00	<input type="checkbox"/>
07/21/08	Diane Gray 3801 Orchard St Sioux City, IA 51104		Staples - env w postage 40 letters @.195	8.35	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$ 37.35	
TOTAL (If last page of this schedule)				\$ 37.35	

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Page 1 of 1
(for Schedule E)